Name in Full

Certificate of Death

Egbert Gordon Browning

Town

County

Died at Near Oakmont Garrett MARYLAND

Date 1899 Month Sept Day 12 | Age Y. 2 M. 6 D. 18 | Native of Md | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of
Wife

Father's Name J. R. Browning

Mother's Name Lucinda Browning

Cause of Death: Primary Enteric Colitis 8 2 — How long sick

Immediate Meningitis — Accident, Suicide, Homicide

Reported by W. C. Kineland M.D.

Address Oakmont Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Name in Full

Certificate of Death

Peter Bruce

Died at New Oakland Town County Garrett MARYLAND

Date 189 9 Month 9 Day 26 | Age Y. 83 M. (annt) D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | Widow Widower | Divorced Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death { Primary 161 | Immediate

How long sick

Accident, Suicide, Homicide

Reported by Garrett Imrad

Address Oakland 9-28

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full ——— Castel

Certificate of Death

Died at Friendsville, Town Garrett, County MARYLAND

Date 189 9 Month 9 Day | Age Y. infant M. D. | Native of | Occupation

Male / Female \ White / Colored \ Married / Single Widow Widower Divorced Number of children living

Husband of

Wife

Father's Name Archibald C. Castel

Mother's Name

Cause of Death: Primary

Immediate

161

How long sick

Accident, Suicide, Homicide

Reported by Garrett Journal 9-7

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full Christian Gnench

Certificate of Death

Died at Grantsville (Town) Garrett (County) MARYLAND

Date 189 9 Month Sept Day 24 | Age Y. 69 M. 9 D. 6 | Native of Germany | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 7

Husband ~~Wife~~ of Mary Beechey

Father's Name Jacob Gnench | Mother's Name

Cause of Death: Primary Paralysis 44 | How long sick 5 days

Immediate | ~~Accident, Suicide, Homicide~~

Reported by H L Burns

Address Grantsville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79[illegible]

Name In Full — Certificate of Death

Mrs Lambert

Died at Town: Oakland — County: Garrett — MARYLAND

Date 189 9 — Month: Sept — Day: 1 — Age: Y. 39 M. D. — Native of: Oakland — Occupation: Housewife

~~Male~~ Female — ~~White~~ ~~Colored~~ — ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ — Number of children living: None

~~Husband~~ Wife of Mr Lambert

Father's Name: Geo G. Spudden — Mother's Name: Spudden

Cause of Death — Primary: Pregnancy — 116 — How long sick: 3 days

Immediate: Uremic mania; Heart-complications — Accident, Suicide, Homicide

Reported by H. W. McComas

Address Oakland Garrett Co Maryland

Must be signed by physician, if any in attendence, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 708CR

Name in Full

Certificate of Death

George Dusty Lewis

Died at Town Lonaconing County Garrett Co. MARYLAND

Date 189? Month Sept Day 9 | Age Y. 13 M. D. | Native of Md | Occupation

Male / White / Married / Widow / Divorced

~~Female~~ / ~~Colored~~ / Single / Widower / Number of children living 5

Husband / Wife of

82

Father's Name Joseph O. Lewis

Mother's Name Mary S. Lewis

Cause of Death: Primary Spinal Meningitis — How long sick 3 wks.

Immediate Cerebral Intussusception — Accident, Suicide, Homicide

Reported by J. D. Kennedy M.D.

Address Oakland Garrett Co Md.

Must be signed by physician, if eny in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55056

Name In Full

Certificate of Death

Emma Helen Phoebus

Died at Town Oakland County Garrett MARYLAND

Date 1899 Month Sept Day 15 | Age Y. 16 M. mo D. | Native of Atlantic Co, N.J. | Occupation —

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living ~~—~~

~~Husband~~ ~~of~~ ~~Wife~~ 82

Father's Name S. S. Phoebus | Mother's Name Ida Lee Phoebus

Cause of Death — Primary: Enteritis. Chronic intestinal Catarrh | How long sick 10 weeks

Immediate: Marasmus, Inanition. | ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by H. W. McComas

Address Oakland Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898